

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	LRP		8-19-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	W	68781	8-10-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	X	7-20-01	
2		X	
3		X	
4		X	
5		X	
6		X	
7		X	
8		X	✓ ✓ ✓
9		X	
10		X	
11		X	
12		X	
13		X	
14		X	
15		X	
16		X	✓ ✓ ✓
17		X	
18		X	
19		X	
20		X	
21		X	
22		X	
23		X	
24		X	✓ ✓ ✓
25		X	
26		X	
27		X	
28		X	
29		X	
30		X	
31		X	
32		X	✓ ✓ ✓
33		X	
34		X	
35		X	✓ ✓ ✓
36		X	
37		X	
38		X	
39		X	
40		X	
41		X	
42		X	
43		X	
44		X	
45		X	
46		X	
47		X	
48		X	
49		X	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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